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PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Kawai et al.
Appl. No. : 09/761,532
Filed : January 16, 2001
For : OPTICAL SIGNAL
TRANSMISSION DEVICE
Examiner : D. S. Kim
Group Art Unit : 2633

CERTIFICATE OF MAILING

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

Nov. 23, 2004

(Date)

Eric M. Nelson, Reg. No. 43,829

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AMENDMENT AND RESPONSE TO OFFICE ACTION

DEC 03 2004

Technology Center 2600

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed July 26, 2004, Applicant respectfully submits the following amendments and remarks in connection with the above-captioned application.

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 5 of this paper.

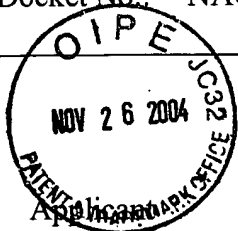
Amendments to the Drawings begin on page 7 of this paper. "Replacement Sheet" for each sheet of drawings being amended can be found in the Appendix.

Remarks begin on page 8 of this paper.

11/29/2004 SSITHIB1 00000045 09761532

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**AMENDMENT / RESPONSE TRANSMITTAL**

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Mail Stop Amendment

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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DEC 03 2004

Technology Center 2600

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

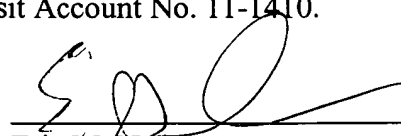
- (X) Amendment and Response to Office Action in 13 pages.
- (X) One Sheet of Replacement Drawing.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	10 - 20 = 0	1202 (\$18)	0 x * =	\$0
Independent Claims	2 - 3 = 0	1201 (\$88)	0 x * =	\$0
Multiple Claim		1203 (\$300)		\$0
1 Month Extension		1251 (\$110)		\$110
			TOTAL FEE DUE	\$110

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.

- (X) A check in the amount of \$110 is enclosed.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



Eric M. Nelson
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Attorney of Record
Customer No. 20,995
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